

**AMENDMENT TRANSMITTAL FORM**

In re application of: **Stuart L. Soled et al**  
 U. S. Serial No. **10054228** [400100]  
 Filed **November 13, 2001**  
 For **IN SITU CATALYST  
 REGENERATION ACTIVATION PROCESS**

- ☐ Before the Examiner
- ☐ Jonas N. Strickland
- ☐
- ☐ Confirmation Number **3285**
- ☐ Group Art Unit **1754**
- ☐ Family Number **P2001J067**

**Commissioner for Patents**  
**P.O. Box 1450**  
**Alexandria, VA 22313-1450**

☒ The undersigned hereby certifies having information and a reasonable basis for belief that this correspondence will be deposited as first-class mail with the United States Postal Service in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450 on **11/13/01**.

Transmittal herewith is an amendment response in the above-identified application.

Petition for extension of time pursuant to 37 CFR 1.136 and 1.137 is hereby made, if and to the extent required. The fee for this extension of time is calculated to be \$ **0** to extend the time for filing this response until **11/13/01**.

The fee for any changes in number of claims has been calculated as shown below:

		CLAIMS AS AMENDED			
		1.	2.	3.	4.
Claim Limitation	After Amendment	Highest Number Previously Filed	Present	Change	Fee
Total Claims	1	1	1	0	\$ 0.00
Independent Claims	1	1	1	0	\$ 0.00
Dependent Claims	0	0	0	0	\$ 0.00
AMOUNT TO BE PAID BY APPLICANT					\$ 0.00
AMOUNT TO BE PAID BY COMMISSIONER					\$ 0.00
TOTAL AMOUNT TO BE PAID					\$ 0.00

1. The fee for each independent claim in excess of the first independent claim is \$4.00.  
 2. The fee for each dependent claim in excess of the first dependent claim is \$2.00.  
 3. The fee for each claim in excess of the first claim is \$1.00.

The total fee for this INFORMATION DISCLOSURE STATEMENT PURSUANT TO 37 CFR 1.98 AND 1.97, including claim changes and any extension of time is calculated to be \$ **0**.

☒ Charge \$ **0** to Deposit Account No. **5-130**.

☒ The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 and 1.17 which may be required by this paper, or credit any overpayment, to Deposit Account No. **5-130**. A duplicate copy of this Form is enclosed.

Date of Signature

Attorney or Agent of Record

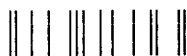
Post Office Address: [to which correspondence is to be sent]  
**ExxonMobil Research and Engineering Company**  
**P.O. Box 900**  
**Annandale, New Jersey 08801-0900**

Norby L. Foss

Registration No. **4787**

☒ Pursuant to 37 CFR 1.50(a)

Examination No. **8175-0004**



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PATENT TRADE MARK OFFICE